

# REGISTRATION STATEMENT

FL-556

Responding IV-D Case No. \_\_\_\_\_

Initiating IV-D Case No. \_\_\_\_\_

Responding Tribunal No. \_\_\_\_\_

Initiating Tribunal No. \_\_\_\_\_

## I. Case Summary (Background of this Matter: Court / Administrative Actions)

Date of Support Order

State and County Issuing Order

Tribunal Case No.

Support Amount/Frequency

Date of Last Payment

Amount of Arrears

Period of Computation

\$

\$

\_\_\_\_\_ thru \_\_\_\_\_  
Date Date

## II. Mother Information

☐ Obligor

☐ Oblige

Full Name and Aliases  
(First, Middle, Last)

Address (Street, City, State, Zip)

Employer (Name, Street, City, State, Zip)

SSN: \_\_\_\_\_

## III. Father Information

☐ Obligor

☐ Oblige

Full Name and Aliases  
(First, Middle, Last)

Address (Street, City, State, Zip)

Employer (Name, Street, City, State, Zip)

SSN: \_\_\_\_\_

## IV. Caretaker (If Not a Parent)

Relationship to Child(ren) \_\_\_\_\_

Full Name and Aliases  
(First, Middle, Last)

Address (Street, City, State, Zip)

SSN: \_\_\_\_\_

## V. Additional Case Information

This order is registered in the following states:

Description and location of any property not exempt from execution:

Other: \_\_\_\_\_

## VI. Verification / Certification

Under penalties of perjury, all information and facts concerning the arrearage accrued under this order are true to the best of my knowledge and belief.

\_\_\_\_\_  
Date

☐ Party seeking Registration

☐ Records Custodian

\_\_\_\_\_  
Sworn to and Signed Before Me This  
Date, County/State

\_\_\_\_\_  
Notary Public, Court/Agency Official and Title

\_\_\_\_\_  
Commission Expires